



Requests for fee waivers or reduced fees are determined on a case by case basis for community based events and community fundraisers that are aligned with the Mission of Durham Parks and Recreation. Fee waivers or reduced fees on rentals of facilities, fields, and equipment must be approved by the Recreation Advisory Commission and the Director of Durham Parks and Recreation.

## **Eligible Organizations:**

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- Non-profits with 501(c)3 status.
- Clubs and organizations that provide educational or community program opportunities that are open to the general public and who donate services.
- Groups that have provided park, field or other facility improvements beyond the scope of the Adopt-A-Park/Adopt-A-Trail program may use their service waiver credit that was issued to them for the cost of the materials.
- City of Durham departments who provide services in return.

## **Requirements:**

- 1. Complete the attached request for reduced or waived fees, partnership/sponsorship addendum and attach a copy of your rental or equipment use application.
- 2. Submit all required information by 5 p.m. on the fifteenth day of a month and at least 30 days prior to the event so it can be reviewed at the next Recreation Advisory Commission meeting. Please plan a couple months a head. Facsimile transmissions will not be accepted.
- 3. You must have paid all refundable deposits and mandatory fundraiser fees. These fees cannot be waived. Attach a copy of the receipt showing all mandatory fees being paid.
- 4. If non-profit a copy of your 501(c)3 must be attached
- 5. Event must benefit the Durham community and be relative to the mission of DPR.
- 6. The RAC will not waive fees for picnic shelters, rental application fees or any fees that are established and associated with cleaning, staff time, setup/dismantle and custodial services.

Any proposals received after 5 p.m. on the fifteenth of the month will be reviewed during the next rotation. Please note that the Recreation Advisory Commission does not meet in July.

## **Please Note:**

This request does not guarantee the availability of DPR location(s) and/or equipment. You must have completed all applicable reservation procedures, including but not limited to reserving the facility and/or equipment and have paid the security deposit and fundraising fee (if applicable). You and the organization you represent are required to follow all established permit regulations and DPR rules during and after the event.

Organization:		
EIN or Business License #:		
Type of business:   Governme	ent Non-profit [	for profit other:
You must attach a copy of the 501	(c)3, if Non-profit	
Address:	City	State Zip
Contact Name:		Title:
Phone: (O)	(C)	(Alt.)
Email:		Web:
Requested facility/location of ever	nt:	
Requested equipment:		
Date(s) of event:	Requested amount to be waived: \$	
Brief Description of Event:		
Type of event: Fundraiser	Commu	nity Event Private Event
Specific details or comments that	may assist the RAC/Dil	ector in making this decision.
the availability of DPR location have completed all applicable r including but not limited to rese deposit and fundraising fee (if denied or a reduction of fees is g	n(s) and/or equipment reservation procedures erving the facility and/ applicable). I furthe granted the organizational established permi	approval or denial does not guarantee t. I further understand that I must is prior to submitting this application for equipment and paying the security is acknowledge that if the request is on I represent must pay all remaining t regulations and DPR rules will be
Signature		Date
For Office Use Only:		
Review Date:	Declined	Approved reduction/waiver
RAC Chair:		Date:
DPR Director:		Date

## 1) Agency: Partner Sponsor Contact Name: Title: Phone: (O) \_\_\_\_\_ (C) \_\_\_\_ (Alt.) \_\_\_\_ Web: Type of support to be provided: 2) Agency: \_\_\_\_\_ Partner Sponsor Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: (O) \_\_\_\_\_ (C) \_\_\_\_ (Alt.) \_\_\_\_ Email: Web: Type of support to be provided: Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: (O) \_\_\_\_\_ (C) \_\_\_\_ (Alt.) \_\_\_\_ Email: \_\_\_\_\_ Web: Type of support to be provided: 4) Agency: \_\_\_\_\_ Partner Sponsor Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: (O) \_\_\_\_\_ (C) \_\_\_\_ (Alt.) \_\_\_\_ Email: Web: \_\_\_\_\_ Type of support to be provided:

Partnership/Sponsorship Addendum: Please list all Partners/Sponsors: